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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of ____

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As a below named inventor, I hereby declare that: My residence, post office address, and citizenship ere as stated below next to my name. I believe I am the original, first and sole inventor (if orly one name is listed below) or en original, first end joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patient is sought on the inventor entitled: MACROCYCLIC NSS. SERUM PROTECTER INVENTED AS									
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	[Page 1 of 2]	

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page __3 of ___ **DECLARATION**

Name of Addition	al Joint Inventor, if any:			□ /	A petition	has been file	d for th	nis unsi	gned inve	ntor			
Given Nan	ne (first and middle [if any])					Family Na	ne or	Surnarr	ne				
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SRIKANTH				,	VENK.	ATRAMAN							
Inventor's Signature	Date												
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Residence: City	WOODBRIDGE	State	N.	Г	Country	U.S.A.		С	tizenship	INDIA			
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

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ANDREW JOSE	PH			F	RONC	GAY				
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Residence: City	KENILWORTH	State	NJ		Country	U.S.A.		Oltizenship	Thailand	
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